

# ***What to expect when you come into hospital to have your baby***

*Information for women with diabetes (page 1 of 3)*

Together we will discuss a plan for the management of your diabetes before you come into hospital. We will write the plan in your notes and you can add the details to your birth plan.

If you have any questions or concerns about your diabetes during your visit you can contact the diabetes team or ask the midwife caring for you to contact them.

If you are on a long acting insulin, either once or twice per day, you should continue this all the time as usual, unless one of the diabetes team tells you otherwise.

It is really important to remember to bring your pregnancy notes, insulin, blood glucose monitor and blood sugars book with you.

## **What to expect for labour and delivery**

At your 34 week birth plan visit, your community midwife will have spoken to you about what to do if you go into labour.

If you think your labour is starting, then you should phone the Beatrice labour ward on 01722 425183.

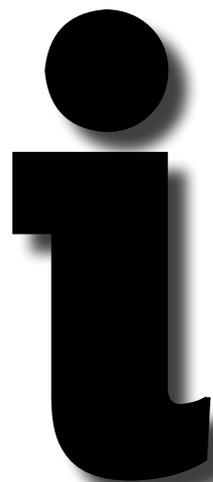
When you come into the labour ward and we have confirmed that your labour has started, your blood sugars will need to be monitored every hour. You can continue to do this yourself with the staff if you feel able or the midwives can do it for you.

If your blood sugar starts to increase then your midwife will start you on an intravenous drip of insulin and sugar to keep your blood sugar under control.

Your midwife will continue to check your blood sugar every hour and will adjust the amount of insulin you are having to try and keep the blood sugars between 4 and 7mmol/l.

## **What to expect when your baby is born**

Once your baby has been born your sugar will continue to be monitored every hour until you are eating and drinking. If you are on an insulin drip this will be continued until you are eating and drinking and you should then go to the insulin regime we have planned and written in your notes. If you have not been on an insulin drip before but your sugar starts to



If you need your information in another language or medium (audio, large print, etc) please contact Customer Care on 0800 374 208 or send an email to: [customer care@salisbury.nhs.uk](mailto:customer care@salisbury.nhs.uk)

You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

Please complete The Friends & Family Test to tell us about your experience at: [www.salisbury.nhs.uk/FriendsFamily](http://www.salisbury.nhs.uk/FriendsFamily) or download our App from the Apple App store or Google Play Store.

The evidence used in the preparation of this leaflet is available on request. Please email: [patient.information@salisbury.nhs.uk](mailto:patient.information@salisbury.nhs.uk) if you would like a reference list.

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rise before you are eating and drinking then a drip will be started. This will be stopped again once you are eating and drinking and back on your usual insulin.

After delivery the insulin doses will be similar to those you were on before you became pregnant and we will discuss this with you before you come in and write the plan in your notes.

### **What if I am having an induction of labour?**

Many women with diabetes are able to have a normal delivery, however, it may be recommended that your labour is induced. Your obstetrician will discuss this with you around the 36th week of pregnancy.

You should continue all your usual insulin while you are being induced. During this time you should continue to monitor your blood sugars and record the results as usual and continue eating as usual.

Once your labour starts your sugar will need to be monitored every hour. You can do this yourself with the staff if you feel able or your midwife can do that for you.

If your blood sugar starts to increase then your midwife will start you on an intravenous drip of insulin and sugar to keep your blood sugar under control.

Your midwife will continue to check your blood sugar every hour and will adjust the amount of insulin you are having to try and keep the blood sugars between 4 and 7mmol/l.

Once your baby has been born your sugar will continue to be monitored every hour until you are eating and drinking. If you are on an insulin drip this will be continued until you are eating and drinking and you should then go to the insulin regime we have planned and written in your notes. If you have not been on an insulin drip before but your sugar starts to rise before you are eating and drinking then a drip will be started. This will be stopped again once you are eating and drinking and back on your usual insulin.

After delivery the insulin doses will be similar to those you were on before you became pregnant and we will discuss this with you.

### **What to expect if you are having a planned Caesarian Section?**

The day before your caesarian you should continue **ALL** your insulin and monitoring as usual. The staff will talk to you about the process leading up to the operation.

Usually you will be asked to be 'nil-by-mouth' from midnight the night before. This means that **on the morning of your C-Section you should have no food and no drink**. If you are on long acting insulin in the morning (eg lantus, levemir, insulatard, humulin I) you should have this as normal on the day of your operation. You should not have any short acting insulin.

You should come to Beatrice Postnatal Ward at 8am.

# What to expect when you come into hospital to have your baby

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As soon as you arrive please check your blood sugar and let the midwife who is caring for you know what your result is.

If this is between 4 and 7 they will not need to do anything else for your diabetes at this time.

Your midwife will continue to check your blood sugar every hour until you are eating and drinking again.

If at any time your blood sugar is above 7mmol/l leading up to, during or after your Caesarian section the staff will set up a drip of insulin and glucose to control your blood sugar. This will be continued until you are eating and drinking with a check of your blood sugar every hour.

When you are eating and drinking you should return to your planned postnatal insulin regime.

After delivery the insulin doses will be similar to those you were on before you became pregnant and we will write this in your handheld hospital notes.